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PLEASE RETURN

# *An Illness*

**DIAGNOSABLE and TREATABLE**



## **GALEN STATE HOSPITAL**

**Montana Alcoholism Services  
Center**

UNITS OF THE DEPARTMENT OF INSTITUTIONS

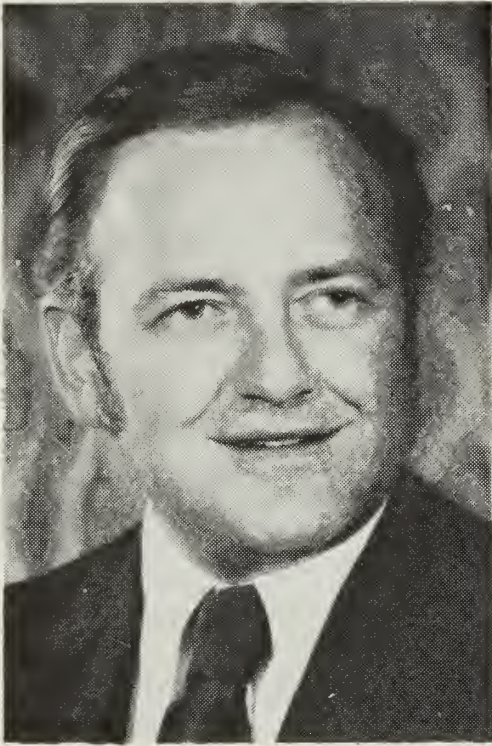
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THOMAS L. JUDGE,  
Governor

# A MESSAGE FROM THE GOVERNOR

Alcoholism, directly or indirectly, touches the lives of over half the population of Montana. As noted in my State of the State Message to the 1974 session of the legislature, I recommended steps and funding to provide a better understanding of, and consequently treatment for, this most common illness. The legislature subsequently passed two significant laws: one affirmed a continuing policy to decriminalize the act of simple intoxication; the other rescinded a law that made alcoholism purely a mental illness. With funds now available, these steps will provide an enlightened choice of treatment and educational modalities for all Montanans.

The Montana Alcoholism Services Center at Galen has a long history of successful treatment of this illness. Past experience there emphasize that alcoholism is diagnosable and treatable. I most sincerely encourage Montanans to support activities that would result in the arrestment of this illness.

Sincerely,

Thomas L. Judge



# ALCOHOLISM . . . DIAGNOSABLE and TREATABLE!

*“Alcohol is a sedative drug:  
alcoholism is addiction to the drug.”*

In the past, health programs designed to treat the symptoms and manifestations of actively practicing alcoholics — irrational behavior, fiscal irresponsibility and the like — rather than the cause, which is addiction to alcohol, have resulted in irreparable harm and even death.

Addiction is the compulsive use of a substance, the exact cause of which is as yet unknown. Statistically, about one person out of eight who drink will become addicted to alcohol, the problem having little to do with choice or willpower. Being an alcoholic should not produce shame any more than having any other physical ailment. How one person acquires the tendency and not another is one of the unsolved mysteries of science.

If you recognize personal problems resulting from drinking, or if irresponsible actions of others seem to be the result of alcohol indulgence, then alcoholism may be indicated. What can be done? First, see your family doctor — *this is an illness that is diagnosable and treatable*. Your doctor may recommend a course of treatment that could include referral to another branch of medicine or to a treatment center or to a concerned organization.

One of the most often referred situations is the treatment center. Specifically, one in Montana, operated by the State, is Montana Alcoholism Services Center at Galen. Many years ahead of comprehensive laws and uniform alcoholism acts, Montana sought to close the “revolving door of alcohol addiction.” In October of 1957, a formal program to “treat the alcoholism” rather than the symptoms was established.

By “treating the alcoholism” apparent neurosis, or, in some case, psychosis, was alleviated, and the person is now able to face life’s problems without the sedative drug of alcohol. Recovery from alcoholism requires first the treatment of a physiological problem, then and educational process — geared to the needs of the individual — followed by psychological and sociological reinforcement to accept reality without a chemical. Over the past 16 years this program has extended successful aid to more than 7,000 Montanans.

The alcoholic treatment program at the Galen hospital follows an adaptable pattern initiated with detoxification or “drying out,” if it is necessary. This process lasts four to eight days under competent medical specialists. Withdrawal from alcohol for some persons is as difficult and dangerous as that required with the use of the so called “hard drugs.” About 15% of those who experience delirium tremens die if left untreated.

For more complete arrestment of the illness there is a thirty-four day treatment program designed to initially reinforce physiological treatment begun in the detoxification stage. More often than not malnutrition is a problem. Most alcoholics don’t eat because they simply cannot. Malnutrition, and all that goes with it, is often the rule rather than the exception.

A second component of the program is educational in nature. Forty-five hours of adult education with class lectures on alcohol, alcoholism, physiological and psychological factors, religious support, alternatives to the use of alcohol, and other related subjects are presented by the staff and outside consultants. Five hours are devoted to question-answer sessions as well as to large group discussions.

Volunteers from community alcoholic organizations offer personal experiences of recovery. Small group discussions, with six to eight members, account for an additional ten hours in the program. Individual coun-

selling is provided by professionals, designed to meet individual needs. Psychiatric, psychological and medical referral services are available when needed.

Subsequently, this new life requires reinforcement. Arrangements are made during the treatment period at the Center for individual follow-up care. The After-care Division of the Department of Institutions, Veteran's Services, Vocational Rehabilitation, Community Alcoholic organizations and Community Mental Health Centers are examples.

The Montana Alcoholism Services Center offers a new, wholesome existence to an alcoholic. Admission for treatment can be set up by your doctor.

Cost of treatment is kept to a minimum; assessments are based on the individual's "ability to pay" in accordance with the State's financial responsibility laws. Private insurance, Medicare, Medicaid, and other programs of a similar nature may be utilized in many cases. Consult your doctor or the Montana Alcoholism Services Center.



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**One of the many lounge areas at the Galen Center.**



**An individual room, the connecting "facilities" are not shown.**





**Program Coordinator, Edward Gendle, lectures on  
"The Three Phases of Alcoholism."**

# **ALCOHOLISM IS DIAGNOSABLE and TREATABLE**

**For Information Write or Call**

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